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INTELLECTUAL PROPERTY LAW

To: U.S. Patent & Trademark Office	From: Ronald E. Smith
Attn: Michael A. Brown	Client: 1320.02
Fax: (703) 872-9306	Pages: 15 including coversheet
Phone: (703) 308-2682	Date: June 7, 2005
Re: USSN 09/682,353	CC: Bailey Walsh & Co.

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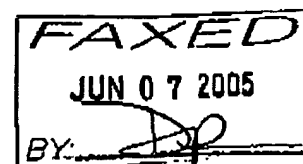
Dear Examiner Brown:

In response to the non-final office action mailed on March 22, 2005, we enclose the following:

- 1) Amendment Transmittal with Certificate of Facsimile Transmission under 37 CFR 1.8(a) dated June 7, 2005 (2 pages); and
- 2) Amendment B with Certificate of Facsimile Transmission under 37 CFR 1.8(a) dated June 7, 2005 (12 pages).

Very respectfully,

Ronald E. Smith
Reg. No. 28,761



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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**RECEIVED
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Application No. : 09/682,353
Applicant: : Richard M. Hall
Filed: : 08/24/2001
Art Unit : 3764
Examiner : Michael A. Brown

Confirmation No.: 8397

Docket No. : 1320.02
Customer No. : 21901
For : Obesity Treatment Aid

Faxed to Technology Center 3700 at (703) 872-9306
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for this application.

STATUS

2. Applicant is an independent inventor. A statement was already filed.

EXTENSION OF TERM

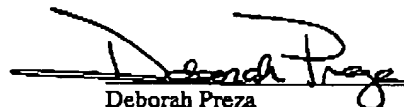
3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant believes that an extension of term is required. A Petition and Fee for Extension of Time is attached hereto.

CERTIFICATE OF FACSIMILE TRANSMISSION

(37 C.F.R. 1.8 (a))

I HEREBY CERTIFY that this Amendment A, including Introductory Comments, Amendments to the Specification, Amendments to the Claims, and Remarks, is being transmitted by facsimile to the United States Patent and Trademark Office, Art Unit 3764, Attn: Mr. Michael A. Brown, (703) 872-9306, on June 7, 2005.

Dated: June 7, 2005


Deborah Preza

(Amendment Transmittal—page 1)

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FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	SMALL ENTITY	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Addit. Fee
Total	34	Minus	35	= 0	x \$25 =	\$0
Indep.	4	Minus	5	= 0	x \$100 =	\$0
First Presentation of Multiple Dependent Claim					+ \$180 =	\$0
Total					Addit. Fee	\$0

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3,
 - ** If the "Highest No. Previously Paid For" IN THIS SPACE (Column 2, Row 1) is less than 20, enter "20".
 - *** If the "Highest No. Previously Paid For" IN THIS SPACE (Column 2, Row 2) is less than 3, enter "3".
- The "Highest No. Previously Paid For" (Total or Indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

No additional fee for claims is required.

Very respectfully,


SIGNATURE OF PRACTITIONER

Reg. No. 28,761
Tel. No.: (727) 507-8558

Ronald E. Smith
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15950 Bay Vista Drive, Ste. 220
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(Amendment Transmittal—page 2)